

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

|  |  |   |  |
|--|--|---|--|
| NAME OF COMMITTEE (In Full)<br><b>CHARACTER COUNTS POLITICAL ACTION COMMITTEE</b>  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00521757   |  |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY<br/>11 / 04 / 2016</div> </div> |  |

|   |               |   |   |
|---|---------------|---|---|
| Full Name of Payee<br><b>Advoc8</b>                       |               | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>12 / 02 / 2016   |   |
| Mailing Address 1342 Florida Avenue NW                    |               | Amount<br>1500.00   |   |
| City<br>Washington  | State<br>DC   | Zip Code<br>20009   | Transaction ID : SE.4131  |
| Purpose of Expenditure<br>Media Production                | Category/Type | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>11 / 04 / 2016  |   |
| Name of Federal Candidate<br>CLINTON, HILLARY RODHAM, , , |               | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought   |               | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____ |   |

|   |               |   |  |
|---|---------------|---|--|
| Full Name of Payee                                      |               | Date of Public Distribution/Dissemination<br>MM / DD / YYYY   |  |
| Mailing Address   |               | Amount  |  |
| City  | State         | Zip Code  | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Purpose of Expenditure                                  | Category/Type |   |  |
| Name of Federal Candidate                               |               | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose   | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |               | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____ |  |

|  |         |
|--|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 1500.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | 1500.00 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , ,

[Electronically Filed]

Date

 MM / DD / YYYY  
 12 / 08 / 2016

Signature